

20/1/20

The Entrant agrees to maintain the price designated below for six months after closing date of exhibition.

Artist Harriet R. Howell (Please print plainly)

Telephone No. CH. F. 8748 Address Bentleyville Road Shagrin Falls, Ohio Zone No. _____

Telephone No. _____ Address _____ Zone No. _____

Please Enclose Registration Fee of \$2.00 (Check or Money Order) With Entry Blank

[illegible]

Entry blanks must be filled out and returned to the Museum on or before April 1, those postmarked later than April 1 will not be accepted.

Entries must be delivered at the Museum between 9 A.M. and 5 P.M. from April 5 to April 12 (except Sunday).

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